

**WORTH AND CHAVASSE'S SQUINT.** By T. Keith Lyle, C.B.E., M.A., M.D., M.Chir. (Cantab.), M.R.C.P.(Lond.), F.R.C.S.(Eng.), and G. J. O. Bridgeman, M.C., M.A., M.B., B.Chir.(Cantab.), F.R.C.S.(Eng.). Ninth Edition. (Pp. viii+392; illustrated. 52s. 6d.) London: Baillière, Tindall & Cox Ltd.

THE presentation and scope of this book have both changed considerably since it was first written by Claud Worth in 1903. The various editions which have followed have maintained the same high standard, and each in turn has been accepted as the standard text book on the subject of squint.

Bernard Chavasse wrote the classical seventh edition thirty-five years after the original publication and added the sub-title of "The Binocular Reflexes and the Treatment of Squint." He regarded all squints as perversions of the normal binocular reflexes, caused by various obstacles during the developmental period. Normally the binocular reflexes are acquired and grounded between the ages of six months and five or six years. This explanation has been retained and elaborated upon, and other of Chavasse's apt and colourful statements introduce each chapter.

The present authors, who were also responsible for the previous edition, state that they have largely rewritten the book to make the story of squint a more continuous narrative, and the subject more concise and easier to understand. They have admirably achieved these objects and have presented a book which is an encyclopædia on the subject of squint, and yet the reader's interest is retained as the various pitfalls of the binocular reflexes are revealed and the actions necessary to preserve or restore them are lucidly evolved.

Some welcome changes in terminology have been introduced. The chapter on congenital ocular palsy has been rewritten and includes interesting descriptions of variations of defective ocular movement due to musculo-facial anomalies. A separate chapter on acquired ocular palsy has been added, and the book throughout is profusely illustrated. This has resulted in considerable enlargement of the present edition.

The authors are to be congratulated on the masterly way in which they have presented the ninth edition. It is an invaluable reference book for the ophthalmologist, the neurologist, and orthoptist, and a fount of knowledge for the more aspiring student.

V. A. F. M.

**INVOLUTIONAL MELANCHOLIA: AN ETIOLOGIC, CLINICAL AND SOCIAL STUDY OF ENDOGENOUS DEPRESSION IN LATER LIFE, WITH SPECIAL REFERENCE TO GENETIC FACTORS.**

By Ake Stenstedt, M.D. (*Acta Psychiatrica et Neurologica Scandinavica, Supplementum* 127, Volumen 34). Copenhagen: Eynar Munksgaard, 1959.

IN his second line the author states that neither of the two words "involutional melancholia" has any specific meaning. It is rather difficult to discuss the ætiology of a condition, the existence of which is in doubt. Evidence is produced to show that the morbidity risk for the so-called "endogenous" affective disorders amongst the sibs and parents of proband material does not differ from that found amongst the relatives of a group described as involutional melancholics. Thus the genetic evidence confirms his original doubts. A depressive illness may be precipitated for the first time by the climacteric, but there is no proof that the illness and the physiological event are casually related.

Social factors are briefly dealt with in the monograph.

J. G. G.

**MENTAL RETARDATION; ITS CARE, TREATMENT AND PHYSIOLOGICAL BASE.** By Hans Mautner, M.D. (Pp. vii+280. 35s.) London: Pergamon Press, 1959.

THIS book has been rapidly produced, judging from the recent dates of some of the references quoted. It would seem to be based on lecture notes expanded here and there as the author considered necessary. In spite of this some passages remain obscure. The title of the book is rather misleading, should the reader expect to find the subject matter treated in the traditional manner. Mental retardation is dealt with almost exclusively in terms of pathology and biochemistry, with the emphasis on the latter. The author has collected a comprehensive and

up-to-the-minute bibliography on subjects ranging from inborn errors of metabolism to mental deficiency associated with kidney diseases. His canvas is extensive, and although it will not completely satisfy the neurologist, the pædiatrician, and the psychiatrist, it serves the useful purpose of providing each with an up-to-date list of references in the other related fields. The text is not at all critical, but refers in barest outline to the sources quoted. On occasions the author shows special interest in some subjects, for example, the rôle of birth trauma in the ætiology of mental retardation.

Clinical descriptions cannot always be relied upon to be entirely accurate, as is the case with Friedreich's ataxia (p. 37). Prophylaxis and therapy is discussed in five pages, the emphasis being almost entirely on physical agents such as the dangers to the foetus of X and other irradiation. The rapidly expanding field of social and industrial education which is at the heart of "Special Care" is left untouched.

It should not be assumed that this book is without value. On the contrary, it provides a valuable panoramic view of the somatic approach to the problem, bringing together every kind of physician interested in children. This profitable union of disciplines can only serve to stimulate an exchange of knowledge that could lead to a better understanding of the ætiology of some kinds of mental deficiency.

J. G. G.

**EARLY DIAGNOSIS BY VARIOUS AUTHORS.** Edited by Henry Miller, M.D., F.R.C.P. (Pp. viii+400. 25s.) Edinburgh and London: E. & S. Livingstone Ltd., 1959.

In his preface the editor states that this book has been written for the general practitioner. In an introductory chapter Lord Cohen of Birkenhead enunciates some valuable guiding principles which the diagnostician would do well to follow. Early diagnosis often means provisional diagnosis, but this is not to be despised, for usually the practitioner must take action without waiting for proof which would satisfy the scientist. "The live problem is to be preferred to the dead certainty."

This book, however, takes us much further than provisional diagnosis. It contains twenty-five chapters, each written by a recognised authority in his subject. The salient points in the patient's history, the special signs to be elicited, the laboratory and radiological investigations concerned in accurate differential diagnosis are presented in full array.

Nevertheless, it is more than a work of reference. It is a book to be read and digested. Being the distilled wisdom of the authors, it is not light reading, but the effort is well worth while.

W. G. F.

**INSULIN TREATMENT IN PSYCHIATRY.** Edited by M. Rinkel and H. E. Himwich. (Pp. xxxiii+386. \$5.00.) New York: Philosophical Library Inc., 15 East 40 Street, New York, 16, N.Y., 1959.

THIS book is a report of the proceedings of the International Conference on Insulin Treatment in Psychiatry held at the New York Academy of Medicine in October, 1958. It is dedicated to Manfred Sakel's contribution to psychiatry in popularising insulin therapy in the 1930's.

Only the first two chapters are regarded by the editors as historical contributions, but many would consider the greater part of the material presented as having already passed into the history of empirical treatment in psychiatry, even at the time when the conference was held.

The protagonists of deep insulin therapy at the conference cling tenaciously to their faith in the efficacy of this method of treatment, tending to minimise controlled observation of its effects in favour of clinical impressions at the bedside. No serious attempt is made to refute the conclusions of those carefully designed investigations that showed clearly that the results of such treatment could at least be equalled when other pharmacological agents were used, provided the psychological setting in which they were given was the same. The conference included papers on the uses of modified insulin therapy in psychiatry and also reference was made to biochemical studies designed to explore the mode of action of the drug.

This book is the story of a dying flame. It does not inspire the reader to believe that its contribution to tomorrow's light will be very great.

J. G. G.